

Maine Revised Statutes
Title 22: HEALTH AND WELFARE
Chapter 263-B: ABORTIONS

§1596. ABORTION AND MISCARRIAGE DATA

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Abortion" means the intentional interruption of a pregnancy by the application of external agents, whether chemical or physical, or the ingestion of chemical agents with an intention other than to produce a live birth or to remove a dead fetus, regardless of the length of gestation. [1989, c. 274, §1 (RPR) .]

B. "Miscarriage" means an interruption of a pregnancy other than as provided in paragraph A of a fetus of less than 20 weeks gestation. [1989, c. 274, §1 (RPR) .]

[1989, c. 274, §1 (RPR) .]

2. Abortion reports. A report of each abortion performed shall be made to the Department of Health and Human Services on forms prescribed by the department. These report forms shall not identify the patient by name or otherwise and shall contain only the information requested on the United States Standard Report of Induced Termination of Pregnancy, published by the National Center for Health Statistics, dated January 1978, or any more recent revision of a standard report form.

The form containing that information and data shall be prepared and signed by the attending physician and transmitted to the department not later than 10 days following the end of the month in which the abortion is performed.

A physician who reports data on an abortion pursuant to this section shall be immune from any criminal liability for that abortion under section 1598.

[1989, c. 274, §1 (RPR); 2003, c. 689, Pt. B, §6 (REV) .]

3. Miscarriage reports. A report of each miscarriage shall be made by the physician in attendance at or after the occurrence of the miscarriage to the Department of Health and Human Services on forms prescribed by the department. These report forms shall contain all of the applicable information required on the certificate of fetal death in current use.

The report form shall be prepared and signed by the attending physician and transmitted to the department not later than 10 days following the end of the month in which the miscarriage occurs.

[1989, c. 274, §1 (NEW); 2003, c. 689, Pt. B, §6 (REV) .]

The identity of any patient or physician reporting pursuant to this section is confidential and the department shall take the steps which are necessary to insure the confidentiality of the identity of patients or physicians reporting pursuant to this section. [1989, c. 274, §1 (RPR) .]

SECTION HISTORY

1977, c. 696, §186 (NEW). 1979, c. 363, §§1-4 (AMD). 1989, c. 274, §1 (RPR). 2003, c. 689, §B6 (REV).

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